

## **In Re Application**

**For: METHOD AND APPARATUS  
FOR POWER LEVEL  
ADJUSTMENT IN A WIRELESS  
COMMUNICATION SYSTEM**

**Examiner: TU X. NGUYEN**

) **Group No. 2684**

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SEP 16 2004

## Technology Center 2600

In response to the Office Action dated June 3, 2004, please amend the above-identified application as indicated below. Applicants hereby petition a one (1) month Extension of Time.

I hereby certify that this correspondence is, on the date shown below, being:

**FACSIMILE**

- ☐ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: \_\_\_\_\_  
(type or print name)

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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Customer No.: 23696

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A#161

## AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450Customer No.: 23696  
Attorney Docket No.: PA 010098  
In Re Application of: Chen et al.  
Serial Number: 09/755,207  
Filed: January 5, 2001  
Examiner: Tu X. Nguyen  
Group Art Unit: 2684

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Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

Technology Center 2600

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid	
Total*	9	9	0	x \$18 =	\$0.00	
Independent**	3	3	0	x \$86 =	\$0.00	
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$290	\$0.00	
EXTENSION FEES				<input checked="" type="checkbox"/> One Month	\$110	\$110.00
				<input type="checkbox"/> Two Months	\$420	\$
				<input type="checkbox"/> Three Months	\$950	\$
TERMINAL DISCLAIMER				\$110	\$	
				TOTAL FEE	\$110.00	

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$110.00.  
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: September 10, 2004

Signature: Erin P. MadillErin P. Madill, Reg. No.: 46,893  
Phone No. 858-658-2598QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 658-5787  
Facsimile: (858) 658-2502

## CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

## MAILING

- ☒ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: Kelley M. O'Patry  
(type or print name)Date: 9/10/04

## FACSIMILE

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